

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000020060

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** AGUILA DELIVERY SERVICES, CORP

**Current Principal Place of Business:**

2690 DOLFINO CT  
SAINT CLOUD, FL 34772

**New Principal Place of Business:**

322 OCEANSIDE CT  
KISSIMMEE, FL 34743

**Current Mailing Address:**

2690 DOLFINO CT  
SAINT CLOUD, FL 34772

**New Mailing Address:**

322 OCEANSIDE CT  
KISSIMMEE, FL 34743

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

AGUILAR, LILIA R  
2690 DOLFINO CT  
SAINT CLOUD, FL 34772 US

**Name and Address of New Registered Agent:**

AGUILAR, LILIA R  
322 OCEANSIDE CT  
KISSIMMEE, FL 34743 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LILIA AGUILAR

04/30/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: AGUILAR, LILIA R  
Address: 322 OCEANSIDE CT  
City-St-Zip: KISSIMMEE, FL 34743

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LILIA AGUILLAR

P

04/30/2011

Electronic Signature of Signing Officer or Director

Date